

FILED

Jan 24 1997 8:00am
Secretary of State

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 736325 (2)
1. Corporation Name
BOYNTON BEACH JEWISH CENTER BETH KODESH, INC.



Principal Place of Business 501 NE 26TH AVE BOYNTON BCH FL 33435	Mailing Address 501 NE 26TH AVE BOYNTON BCH FL 33435-2168
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/08/1976		3a. Date of Last Report 01/31/1996					
21	22	23	24	25	26	27	28	29	30	4. FEI Number 59-1680041	Applied For Not Applicable
Suite, Apt. #, etc.		City & State		Zip		Country		Suite, Apt. #, etc.		City & State	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
JACK SIEGEL 10069 B ANDREA LANE BOYNTON BCH, FL BOYNTON BEACH FL 33437				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRINDLIS, GEORGE	1.2 NAME	
STREET ADDRESS	5272 PIPING ROCK DRIVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	1.4 CITY - ST - ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAYERSON, JOE	2.2 NAME	
STREET ADDRESS	2615 NE 3RD COURT, #117	2.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	2.4 CITY - ST - ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOCHMAN, IRWIN	3.2 NAME	
STREET ADDRESS	130 NE 26TH AVENUE, # 104	3.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	3.4 CITY - ST - ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIEGEL, JACK	4.2 NAME	
STREET ADDRESS	1069 B ANDREA LANE	4.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	4.4 CITY - ST - ZIP	
TITLE	SD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KASS, WILMA	5.2 NAME	
STREET ADDRESS	5231 BROOKVIEW DRIVE	5.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jack Siegel WILMA KASS JACK SIEGEL - TREAS. 1/14/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0042282

CR2E037 (9/96)